Form **8871**

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Internal Revenue Service				
Part I General Information	<u>n</u>	 		
1 Name of organization	~ ~ A A	9 a	Employer identification number	
20 Mailing address (P.O. Box or nu	SSANBLY I	3/51	1 HONE	
20 Mailing address (P.O. Box or nu	mber, street, and room or suite	number)	91-2064795	
7.5		2842		
3 E-mail address of organization	NA			
4a Name of custodian of records		ıstodian's address		
CAROL ETLIN		12292 HESTER SEPT.		
		GARDEN GA	POVE, CA 92841	
5a Name of contact person		5b Contact person's address		
CAROL ETLIN		12292 LESTER PL		
		GARUSU GRO	VE, CA 92841	
6 Business address of organizatio	n (if different from mailing addr	ess shown above). Number, str	reet, and room or suite number	
		DE GROWN, CA	72041	
City or town, state, and ZIP cod	e e			
Part II Purpose				
7 Describe the purpose of the org	anization	7		
TO AID DE	nocopalic	CANIDATES	Russiac FOR	
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ma 689	SINTE MY	sendly I	?/ <u>\$ /</u>	
Part III List of All Related	Entities (see instruction	s)		
8a Name of related entity	8b Relationship	8c Address		
NONE				
			DEOENTED	
			RECEIVED	
			SS	
			8 AUG 0 2 2000 8	
			8 AUG 0 2 2000 SE	
			OGDEN, UT	
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Cat. No. 30405V

For Paperwork Reduction Act Notice, see page 4.

Part IV 9a Name		9b Title	See Address See Instructions)
CAR	POL CETCIN	PRES	17292 HESTER PL
			GARDEN BROVE, CA 92841
Phil	ip L. BROADWARE	tres.	7.0.BX 1120A
			CHESEN GROVE, CA 92842
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HOTE	<i>;</i>		
WEA	OR AVERT	T DUT TO	INK WE NEED TO FILE.
>mA	L OMGANIZATION	i sour in	The will have been a second
Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge at it is true, correct, and complete.			
	•		1/21/2
Sign Signature of agthorized official 7/31/00 Date			
Here			